

Centering Perspectives on Black Women, Hair Politics, and Physical Activity

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As researchers categorize issues facing Black women's health, obesity and physical exercise continue to be significant topics of debate. General interventions targeted toward Black women to address obesity and increase physical exercise have been largely ineffective. In this article, I situate the current public health discourse on obesity and related interventions within a sociocultural context of body appearance, with a specific focus on hair. Why do some African American women feel such strong ties to their hair that they will avoid exercise? What can be done to understand this phenomenon and address alternatives that may make both hair maintenance and regular exercise feasible? I map a theoretical argument for why hair matters for some women, and discuss how physical activity intervention strategies might be improved by considering such complexities. (*Am J Public Health*. 2014;104:810–815. doi:10.2105/AJPH.2013.301675)

Hair. It may seem like a mundane subject, but it has profound implications for how African American women experience the world.
—L. Jacobs-Huey^{1(p3)}

How is hair suitable content for framing a public health matter? As the mantra goes, “the personal is political.”² Weitz notes that

hairstyles serve as important cultural artifacts, because they are simultaneously public (visible to everyone), personal (biologically linked to the body), and highly malleable to suit cultural and personal preferences.^{3(p667)}

In discussing hairstyles as a feature of the cultural body, this article gives serious attention to the topic of hair and its significance as a barrier to exercise. The mechanism linking culture, identity, hair, and physical activity is complex and not well-documented; therefore, this article is necessarily speculative. However, given the importance of understanding all barriers that might deter healthy behavior, I examine how hair and leisure-time physical activity are related by using 2 philosophical perspectives to frame the discussion: intersectionality and standpoint theory. Together, these considerations place Black women—and their everyday lives—at the center of the dialogue about their exercise behavior.

(Throughout this article, the terms “Black” and “African American” will be used interchangeably.

Both referents denote people of African descent—foreign- and US- born. Although this article focuses on the hair experience of women of African descent living in the United States, it is plausible that similar themes are present to some extent in other geographic locations as well.)

FRAMING THE ISSUE OF BLACK WOMEN AND EXERCISE

Research indicates that African American women are at increased risk for being obese and for developing obesity-related diseases.⁴ Reports also indicate that Black women exercise less than any other racial/ethnic-gender group, including Black men.^{5,6} A robust literature provides numerous explanations for why Black women do not exercise; however, Hall et al. suggest 1 more: hair.⁷ The idea received significant media attention in 2011 when US Surgeon General Regina Benjamin claimed that,

oftentimes you get women saying, “I can’t exercise today because I don’t want to sweat my hair back or get my hair wet” . . . when you’re starting to exercise, you look for reasons not to, and sometimes the hair is one of those reasons.⁸

The statement implies that Black women use hair as an excuse not to exercise; however, research suggests that this is only a partial

representation of why hair presents an issue for some women. According to one of the few published reports on the topic, Hall and colleagues found that of 123 African American women aged 21 to 60, 38% of women surveyed cited avoiding exercise because of their hair.⁷

(Respondents in the Hall et al. report were responding to questions regarding leisure-time physical activity. The majority of public health exercise interventions are focused on leisure-time physical activity, defined as any activity undertaken during discretionary time that leads to a substantial increase in the total energy expenditure above basal levels. Exercise, the primary form of leisure-time physical activity, is described as structured, planned, and repetitive activity over an extended period of time with a specific objective such as increasing fitness, performance, or health. Conventionally, these terms are used synonymously, and they will be used interchangeably throughout this article.)

These women were also less likely to meet recommended levels for physical activity when they did exercise (<150 minutes/week). Hair concerns prevented 35.9% of the surveyed women from swimming or engaging in water activities and led 29.1% to avoid aerobic and gym activities.⁷ Why is this? The most commonly cited hair-related concerns that kept women from exercising were sweating out hairstyle (37.9%) and time to wash, dry, and style hair (22.3%). This study highlights 2 important points: (1) the upkeep of hair is important enough to some women to avoid exercise, and (2) there is a cost associated with maintaining hair while exercising that may be considered prohibitive.

In reviewing the small body of literature that exists on hair barriers, economic and time costs appear to be a primary concern.^{9–15} Specifically, the maintenance required in the upkeep of hair following exercise activity—personal styling or frequent visits to the hair salon—are

considered both expensive and time-intensive.⁹ Hairstyling in the African American community can entail a substantial time and monetary investment. The time required to maintain a groomed appearance can vary significantly, depending upon the style of hair. Hairstyles are often done with the intention of being preserved for days or weeks. Salon services vary in cost, but prices are usually more expensive for styling that is designed to be preserved. In addition, it has been well-documented that Black women cite time constraints and multiple responsibilities among the chief (nonstructural) reasons for not exercising.^{16–19} Therefore, an additional time commitment devoted to hair maintenance is likely to create a significant barrier.

To put into context, these findings might be best interpreted through a lens that focuses on how life circumstances influence perspectives, values, and beliefs. Standpoint theory^{20,21} centers one's social position and asks "persons to describe and discuss their experiences with hope that their knowledge will reveal otherwise unexposed aspects of the social order."^{22(p409)} In other words, by asking Black women who do not exercise what prevents them from doing so, a previously unexposed fact is revealed: hair is an important aspect of the decision-making process. A second feature of standpoint theory takes into account strong objectivity, defined as initiating research from the perspective of those being studied. Therefore, centering research on Black women's exercise behavior necessarily entails asking Black women about the lives of Black women, thus providing a research agenda that is more closely aligned with the reality of the lived experience.

In that reality, hair is an important representation of identity for most women, regardless of race.³ Hairstyles are often perceived as facilitating messages to greater society. Women who feel certain hairstyles affirm their aesthetic value, self-worth, or central identity may be more reluctant to alter the style or state of their hair for any reason.^{23–26}

At the same time, not all women avoid exercise because of their hair. Therefore, in terms of developing strategies to engage certain groups in physical activity, an emphasis should be placed upon identifying the proportion of Black women who find combining hair maintenance and exercise to be especially burdensome.

Targeting individuals in this way calls for an intersectional approach that first acknowledges that hair is a valid barrier to exercise for a subset of women. Second, attempts should be made to address the challenges expressed by those women by taking their concerns into account. Intersectionality maintains that social, biological, and cultural identities (e.g., race, gender, age, socioeconomic status, disability) are not independent, but interdependent.²⁷ Social categories interrelate on multiple and simultaneous levels (intersections) and interact to form vectors of oppression and privilege that are reflected through both the individual experience and macrolevel interlocking systems (i.e., racism, classism, sexism, heterosexism, ableism).^{27,28}

Previous research suggests that the intersectional personal experience can be measured qualitatively through in-depth interviews, narratives, and open-ended questions.^{29–31} This approach establishes that no one group is a monolith. Contrary to a comparative (intercategorical) approach that compares Black women and White women on a metric (e.g., frequency of exercise), an intersectional approach emphasizes an intracategorical (within-group) approach that reveals differences within groups and identifies those who may be particularly unlikely to exercise.³¹ In categorizing meaningful differences, an intersectional perspective recognizes that social life is complex; this complexity may not be realized in reducing individuals to fixed categories.^{32–35} Furthermore, in viewing this complexity from the standpoint of Black women, researchers center the experiences of Black women within a context that places value on the real-world everyday challenges associated with maintaining regular physical activity.

INTERSECTIONAL APPROACHES

Bowleg describes the utility in applying an intersectional framework to public health research, arguing that

intersectionality provides the discipline of public health with a critical unifying interpretive and analytical framework for reframing how public health scholars conceptualize, investigate, analyze, and address disparities and social inequality in health.^{31(p1267)}

With this perspective, it may not serve research well to approach the issue of physical

inactivity with a single-category approach (e.g., race or gender), or simply applying strategies that have been successful in other groups to Black women.

A new wave of approaches to health interventions provides novel opportunities for engaging individuals within communities in healthy behaviors, as it has become apparent that solely addressing individual behavior has limited effectiveness.³² Among the most notable efforts include strategies that emphasize custom tailoring, integrate technology,³³ and utilize community-based partnerships.

Tailored Interventions

Social-ecological models suggest that health promotion is not restricted to a single level of intervention, but instead should consist of a combination of strategies selected on the basis of the level of meaningfulness to the intended intervention recipients' personal experiences.^{34,35} Hair is meaningful to the lived experience of most women, and may be particularly central for Black women because of its historical and deep-rooted cultural significance.

Whitt-Glover et al. argue that programs with a cultural focus are imperative to changing attitudes toward exercise for African American women and girls, as beliefs that exercise is an unpleasant, unnecessary experience persist.³⁶ Several studies note that Black women are often socialized during childhood to avoid sports or activities, citing hair as a primary reason.^{37–39} In fact, Boyington et al. found that, among African American adolescent girls, popular beliefs about an active lifestyle included notions of a "beauty cost" that exercise is likely to mess up hair and makeup.^{40(p5)} Hair was often used as a rationale to justify not participating in organized school activities (e.g., recess or physical education) because of insufficient time to reconstruct a groomed appearance.

These attitudes can be carried over into adulthood as well. Women who have internalized stereotypes about sports and appearance originating from childhood may believe that they missed opportunities to learn to do certain exercises, such as swimming.^{41,42} In addition, the motivation to learn and adopt these behaviors as adult women is often complicated by intense daily schedules and demands on time, which may foster the belief that exercise is an

optional, leisure pursuit.^{17,18,43} Henderson and Ainsworth found that, among older Black women, past life experiences were influential in shaping current attitudes toward exercise behavior, including not having grown up with role models who exercise and discomfort in gyms because of limited experience in such environments. These factors were perceived as barriers that affected motivation and willingness to engage in exercise.⁴¹ Therefore, researchers and practitioners should continue to devise ways to operationalize and test physical activity models in ways that are theoretically valid and tailored for Black women.^{37,44}

Social Support Models

Behavioral modification should be considered within the appropriate social context, which includes evaluating networks of friends and family, and ways of accessing health information.⁴⁵ Social networks can promote better health outcomes, and social support has been cited as a key motivating factor in engaging Black women in leisure-time physical activity.^{46–49} Traditionally, programs that focus on family or friend support and community engagement have been more successful in increasing physical activity among both Black women and girls.^{49,50} These approaches not only encourage modeling behavior by parents and peers, but they also engage the community at large to prioritize physical activity. Churches and faith-based organizations have been instrumental in sponsoring recreational classes and providing safe and affordable exercise options in the community.^{51–53}

Other community institutions, such as hair salons, provide an equally promising source of support for combining hair and strategies for exercise. Studies have shown that training salon stylists as lay health professionals can be an effective tool for health promotion and information dissemination.^{54–56} Engaging salons and hair stylists in a dialogue about hair and exercise may provide emotional support, as well as a platform for Black women and stylists to communicate about feasible options for maintaining hairstyles that are amenable to intense exercise. Hair stylists can also provide clients with tangible support, in the form of tools and techniques for exercising and managing hairstyles between salon visits.

Emphasizing individual competencies and natural support systems are both components of empowerment.⁵⁷ Empowering women in this way may perhaps be the best strategy for encouraging participation in exercise. Empowerment-based models build agency, self-esteem, and effective change in beliefs and attitudes.⁵⁸ Women concerned with maintenance may find that beauty and hair aids decrease the burden of management and upkeep during periods of high-intensity workout and exercise. Preservation tools (wraps, scarves, etc.) and protective styling could encourage women to exercise more frequently if they are able to do so without disturbing their hairstyle. Therefore, expanding social networks to include hair salons is an untapped strategy for identifying additional sources of support, and has the potential to generate a sense of agency for women with hair concerns.

Social and Online Networking Sites

A less documented approach to engaging African American women in exercise may be facilitated through online communities and social networking sites. Online communities are defined as social clusters that emerge from online interactions, in which networks and personal relationships can be developed.⁵⁹ Although some debate exists regarding whether social networking sites are considered communities, it remains true that online groups typically share some common interest or experience. A growing amount of research suggests that people voluntarily join or contribute to online communities and derive benefits from them, whether they are active participants or not.⁶⁰

Most public health research to date on online communities has focused on the benefits of social support for coping with life-threatening diseases or severe conditions, such as cancer, HIV/AIDS, and mental illness.^{61–64} However, recently, attention has shifted to the possible use of social networking sites for health promotion as well.⁶⁵ For example, the Social Networks for Activity Promotion model is a multilevel framework that specifically targets modifiable factors influenced by social networks, and aims to create sustainable opportunities for physical activity through electronically mediated interventions. Initial research using the Social Networks for Activity Promotion

approach suggests that social network functions that might prompt physical activity in a natural environment may translate to online settings as well.⁶⁶

In general, combining research on physical activity and online communities provides several benefits. First, online communities represent a broad trend within society where knowledge and expertise are shared and distributed among virtual communities and online social networks, rather than localized organizations. Understanding how online participation facilitates emotional support and behavior change can bridge important gaps in the way technology can be used to intervene on health.⁶⁷ Second, online communities are becoming increasingly ubiquitous and examining how these communities can successfully disseminate information and empower audiences has the potential to stimulate new interventions and practices targeting health behaviors. Empirical evidence suggests that engaging in online communities can provide social support benefits in the form of informational support, emotional support, and a sense of empowerment.^{68–73} Research also suggests that unlike traditional support groups that may be limited by geographical location, online groups are easily accessible, always available, and provide anonymity, which allow for a highly effective, goal-driven process to access information, build relationships, and provide or receive empathic support.⁶⁵

Creating a broad definition of community in this way can have tremendous implications for providing support to Black women in reconciling hair concerns and exercise. Demonstrating the utility of this approach, Im et al. examined attitudes toward exercise among participants in an online forum for ethnic minorities, and found themes consistent with previous research. When asked to describe factors that influence exercise behavior, African American women reported having high levels of body satisfaction, feeling that they missed opportunities to learn certain exercise behaviors as a child (e.g., swimming), feeling that physical activity is a luxury because of busy schedules, and wanting to avoid exercise because of “sweaty hair.”⁴³

Therefore, the interaction with online communities provides researchers with information that may not be readily accessible through

traditional means, and allows participants to describe personal experiences on their own terms. Defining barriers based upon what women view as personal obstacles (i.e., a standpoint) provides the impetus for asserting one's own identity, creating new knowledge, and challenging conventional identities imposed by formulated views of the socially and politically dominant. The assertion of self—who I am and what matters to me—adds to a body of knowledge about the personal life and how that life is experienced. Moreover, online communities hold the potential to be transformative in that they are knowledge repositories and can provide access to information, social support, and opportunities for empowerment through sharing personal experiences.^{65,67}

Though not documented by empirical research, hair online communities exist that appear to provide similar features of support for Black women desiring to change their hairstyles for a variety of reasons, including exercise. As previously referenced, Hall et al. noted that nearly half of the women surveyed in their study had considered modifying their hairstyle to facilitate exercise.⁷ In fact, women who expressed dissatisfaction with the appearance of their hair were more likely to consider changing it to allow for exercise, suggesting that the resistance to exercise because of hair is a modifiable factor. The styles referenced for accommodating exercise were generally those that required the least maintenance—ponytails, braids, cornrows, and natural hairstyles.

In recent years, more Black women have transitioned to wearing natural hairstyles, and some have characterized a “natural hair movement,” similar to the Black is Beautiful movement of the 1960s and 1970s. Having natural hair consists of rejecting chemical hair treatments (e.g., relaxers, straightening aids) that artificially modify the texture of the hair, and opting to wear hair in a natural state.^{74–76} According to a 2011 report, 36% of Black women refrained from using chemical relaxers or straightening products, an increase from 26% in 2010.⁷⁷

To be clear, wearing natural hair does not ensure participation in exercise; however, natural hair may require less maintenance and might contribute to an increased general awareness about healthy behaviors. Representations

of women's transition to natural hairstyles or “hair journey” can be found detailed on online hair blogs, video blogs, Black women's hair forums, and user-generated content sites, such as YouTube.

Although there are no official estimates regarding the number of online hair communities, YouTube hosts 114 000 channels devoted to natural hairstyles for Black women. SportyAfros.com began as a YouTube channel designed to incorporate fitness and hair care for Black women. The site is now independently maintained and states a mission of “health over hair” by helping “Black women achieve optimal health and connecting the dots between hair care, exercise and nutrition.”⁷⁸ SportyAfros.com provides information about workout hair care solutions and makes recommendations for combining various hairstyles with swimming, cycling, and running. A significant portion of the Web site is devoted to diet, nutrition, and wellness, and a Facebook group functions as a platform to discuss hair and fitness training plans among site users.

Several other YouTube channels highlighting personal hair-transformation journeys now provide tutorials on healthy eating, workout instructions, and tips for swimming with natural hair.^{79,80} Interestingly, the most popular channels log millions of views and average more than 100 000 subscribers each, which constitutes a sizeable audience for disseminating information related to both hair-care practices and healthy behaviors. Using online communities may be one useful method in reframing hair identities and promoting physical activity. These forums are often perceived as communities of social support and encouragement, which may be one reason for their success.^{81,82}

CONCLUSIONS

This article examines the argument that hair presents a barrier to exercise, and discusses a small number of studies that support that claim. By using theoretical framing that centers the daily experiences of Black women as important considerations in understanding exercise behavior, some attempt is made to situate the discussion around hair and health as a nontrivial issue. For some women at least, hair presents a real barrier to exercise in that

the time and economic constraints involved in preserving a hairstyle postexercise frames physical activity as prohibitive, or perhaps a luxury. Though complex, it may be important to converge disparate commentaries in relation to hair politics and health in a meaningful way, and to discuss the implications for interventions targeted toward Black women.

A number of reviews emphasize the critical need to examine how beliefs central to the individual relate to contextual correlates, yet few interventions have combined knowledge about how sociocultural attitudes and ideologies influence exercise behavior for African American women.^{33,83–86} By placing the real barriers some women face within a social context, it is possible to understand physical activity disparities from the standpoint of Black women. If public health is to be transformative in moving inactive women to activity, culturally competent strategies must be developed with these concerns in mind. Only then can interventions effectively have an impact on the health of Black women and, by extension, Black families and communities.

There is still considerable knowledge to be gained about the ways in which culture and psychosocial beliefs tied to hair, appearance, and general body image shape decisions about whether to exercise. Examining modifiable factors and linkages between beliefs and behavior provide a significant opportunity to reveal motivations for initiating and sustaining healthy behaviors. Health promotion efforts should continue to incorporate multiple-level strategies and select interventions that are personally meaningful to the lived experience. This review provides some insight about the relationship between hair and health for Black women, and suggests that additional attention is warranted to address beliefs about beauty ideals and hairstyle as a barrier to exercise. Future research should consider understudied strategies to develop models that empower and encourage individuals to overcome these barriers. ■

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